



THE COMMONWEALTH OF MASSACHUSETTS
DIVISION OF BANKS
1000 Washington Street, 10th Floor, Boston, Massachusetts 02118

**FOREIGN TRANSMITTAL AGENCY
ANNUAL REPORT TO THE COMMISSIONER OF BANKS
FOR YEAR ENDED DECEMBER 31, 2012**

Each entity licensed as a foreign transmittal agency under Massachusetts General Laws chapter 169 *et seq.* is required to file an Annual Report for the calendar year ending December 31st by January 31st of the following year.

Massachusetts General Laws chapter 169, §9 and the Division of Banks' regulation 209 CMR 44.06 require foreign transmittal agencies to file an Annual Report to the Commissioner of Banks on or before January 31st of each year. In accordance with the statute, a late fee of \$5.00 per day will be assessed to licensees that fail to provide an Annual Report to the Division of Banks on or before January 31, 2013.

The Annual Report consists of two schedules:

SCHEDULE A	Total transactions conducted by the licensee in 2012
SCHEDULE B	Breakdown of transactions conducted at each licensed location in 2012

The Annual Report must be typewritten or legibly written in ink. Each schedule must be fully completed. Incomplete Annual Reports will not accepted. Any item which is not applicable to the licensee should be properly noted and reasons provided. Where insufficient space is provided to answer a question completely, please attach an addendum to the schedule. Please make copies of Schedule B as needed.

The Annual Report must be submitted on or before January 31, 2013 to:

**Division of Banks
Non-Depository Institution Supervision
1000 Washington Street, 10th Floor
Boston, MA 02118-6400**

Please retain a copy of the Annual Report for your records. If you have any questions regarding this report, please contact the Division of Banks at (617) 956-1500 extension 554.

**ANNUAL REPORT TO THE COMMISSIONER OF BANKS
FOREIGN TRANSMITTAL AGENCY
FOR THE YEAR ENDED DECEMBER 31, 2012**

SCHEDULE A

NAME OF LICENSEE: _____

Provide the following information for the person responsible for the information contained in this annual report:

NAME: _____

BUSINESS NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ **FAX NUMBER:** _____

EMAIL ADDRESS: _____

The undersigned is authorized to attest that the attached schedules of the report have been prepared in conformance with the issued instructions and are true to the best of my knowledge and belief. This report must be signed by an authorized manager and must be attested to by at least one director or member.

We, the undersigned individuals, attest to the correctness of the attached schedules of the report and declare that they have been examined by us and to the best of our knowledge and belief have been prepared in conformance with the instructions issued and are true and correct.

_____ Signature of authorized manager	_____ Typed name and title	_____ Date signed
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_____ Signature of director/member	_____ Typed name and title	_____ Date signed
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_____ Signature of director/member	_____ Typed name and title	_____ Date signed
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On this _____ day of _____, before me, the undersigned notary public, personally appeared the above named and proved to me through satisfactory evidence of identification, which was/were the person(s) whose name(s) is/are signed on this document, and acknowledged to me that he/she/they signed it voluntarily for its stated purpose.

My Commission Expires:
(Stamp or Seal)

Notary Public

(A.1) Provide the number of transactions and the total amount of transactions remitted to foreign countries by the Licensee from Massachusetts consumers during the 2012 calendar year.

MONTH	# OF TRANSACTIONS	TOTAL AMOUNT OF TRANSACTIONS (\$)
JANUARY 2012		
FEBRUARY 2012		
MARCH 2012		
APRIL 2012		
MAY 2012		
JUNE 2012		
JULY 2012		
AUGUST 2012		
SEPTEMBER 2012		
OCTOBER 2012		
NOVEMBER 2012		
DECEMBER 2012		
2012 TOTAL	*	**

The Licensee is required to complete a separate SCHEDULE B for each licensed agent/branch location which conducted transactions in the year 2012.

* The Total # of Transactions must equal the aggregate number of transactions listed in all Schedule B's completed by the Licensee.

** The Total Amount of Transactions (\$) must equal the aggregate amount of transactions listed in all Schedule B's completed by the Licensee.

(A.2) Divide the total amount of all transactions during 2012 by 52. This is the weekly average amount of transacted. The Licensee will be required to provide a Bond or Security equal to at least twice the weekly average amount of transactions or a minimum of \$50,000, whichever is more.

COLUMN A	COLUMN B	COLUMN C
TOTAL AMOUNT OF TRANSACTION AS STATED ABOVE	COLUMN A DIVIDED BY 52 (WEEKLY AVERAGE)	COLUMN B x 2 (TWICE WEEKLY AVERAGE) REQUIRED BOND AMOUNT

The amount listed in Column C or \$50,000, which ever is greater, is the bonding requirement for the Licensee and will be reviewed by the Division of Banks during the upcoming license renewal.

[illegible][illegible]

(A.6) List the number and aggregate dollar amount of all money received for transmission from Massachusetts consumers in 2012 that was not forwarded by the recipient within seven (7) days. Also provide a summary of the reason for the delay.

[illegible]

(A.7) List the Licensee's amounts on deposit in savings banks, national banks and trust companies, as of December 31, 2012.

[illegible]

(A.8) List the Licensee's amounts on deposit in foreign banks, as of December 31, 2012.

[illegible]

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FOREIGN TRANSMITTAL AGENCY
FOR THE YEAR ENDED DECEMBER 31, 2012**

SCHEDULE B – AGENT/BRANCH DATA

A separate Schedule B is required to be completed for each agent/branch location in Massachusetts where the Licensee conducted business from during 2012. You must reproduce as many copies of the two-page Schedule B as necessary.

NAME OF LICENSEE: _____

NAME OF BUSINESS (AGENT or BRANCH): _____

ADDRESS OF AGENT/BRANCH: _____

LICENSE NUMBER OF AGENT/BRANCH: _____

MANAGER OF AGENT/BRANCH: _____

(B.1) Provide the number of transactions and the total amount of transactions remitted to foreign countries at the licensed location listed above during the 2012 calendar year.

MONTH	# OF TRANSACTIONS	TOTAL AMOUNT OF TRANSACTIONS (\$)
JANUARY 2012		
FEBRUARY 2012		
MARCH 2012		
APRIL 2012		
MAY 2012		
JUNE 2012		
JULY 2012		
AUGUST 2012		
SPETMBER 2012		
OCTOBER 2012		
NOVEMBER 2012		
DECEMBER 2012		
2012 TOTAL		

The totals above must be included in the amount stated in Schedule A.

[illegible]